

## PART B - FEE(S) TRANSMITTAL

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67820 7590 02/28/2007

ROBERT R. RICHARDSON, P.S.  
 P.O. BOX 2677  
 SILVERDALE, WA 98383-2677

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Robert R. Richardson	(Depositor's name)
Robert R. Richardson	(Signature)
4/5/07	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/607,792	06/27/2003	Robert T. Beierle	BOEI-1-1191	6267

TITLE OF INVENTION: PASSIVE REPEATER/TERMINATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300			
EXAMINER	ART UNIT	CLASS-SUBCLASS				
BUI, HUNG S	2841	455-013400				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert R. Richardson, P.S.

2

3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Boeing Company

Chicago, Illinois

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies

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☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Robert R. Richardson

Date

4/5/07

Typed or printed name

Robert R. Richardson

Registration No.

40,143

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**FAX TRANSMISSION****DATE:** April 5, 2007**PTO IDENTIFIER:** Application Number 10/607,792-Conf. #6267  
Patent Number**Inventor:** Robert T. Beierle**MESSAGE TO:** Office of Patent Publication**FAX NUMBER:** (571) 273-2885**FROM:** ROBERT R. RICHARDSON, P.S.

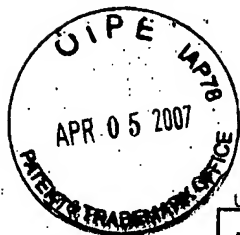
Robert R. Richardson

**PHONE:** (360) 692-0626**Attorney Dkt. #:** BA1-01-0588 (01-588)**PAGES (Including Cover Sheet):** 5**CONTENTS:**Issue Fee Transmittal (1 page)  
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PTO/SB/97 (09-04)  
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Application No. (if known): 10/607,792

Attorney Docket No.: BA1-01-0588 (01-588)

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on April 5, 2007  
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40,143  
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